

41

08-23-04

2123/AS

AMENDMENT TRANSMITTAL LETTER

Docket No.
06727/000H560-US0Application No.
09/605,334-Conf. #3652Filing Date
June 27, 2000Examiner
T. H. StevensArt Unit
2123

Applicant(s): Daniel Geist et al.

Invention: IDENTIFICATION OF MISSING PROPERTIES IN MODEL CHECKING

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AUG 27 2004

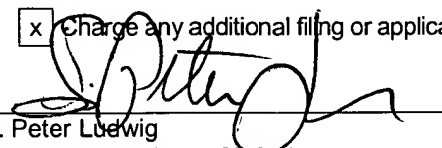
TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

Technology Center 2100

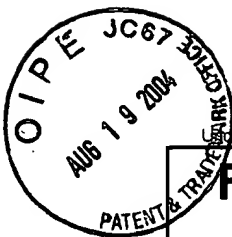
The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	32	- 32 =		x	0.00
Independent Claims	6	- 6 =		x	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					0.00

☒ Large Entity☐ Small Entity☒ No additional fee is required for this amendment.☐ Please charge Deposit Account No. _____ in the amount of \$ _____.
A duplicate copy of this sheet is enclosed.☐ A check in the amount of \$ _____ to cover the filing fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized to charge and credit Deposit Account No. 04-0100
as described below. A duplicate copy of this sheet is enclosed.☒ Credit any overpayment.☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.
S. Peter Ludwig
Attorney Reg. No.: 25,351Dated: August 19, 2004DARBY & DARBY P.C.
P.O. Box 5257
New York, New York 10150-5257
(212) 527-7770

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FEE TRANSMITTAL for FY 2004		Complete if Known			
Effective 10/01/2003. Patent fees are subject to annual revision.		Application Number	09/605,334		
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	June 27, 2000		
TOTAL AMOUNT OF PAYMENT (\$)		First Named Inventor	GEIST, Daniel et al.		
180.00		Examiner Name	Stevens, Thomas H.		
METHOD OF PAYMENT (check all that apply)		Art Unit	2123		
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None		Attorney Docket No.	06727/000H560-USO		
<input type="checkbox"/> Deposit Account: Deposit Account Number: 04-0100 Deposit Account Name: Darby & Darby P.C.		FEE CALCULATION (continued)			
The Director is authorized to: (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s) <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		3. ADDITIONAL FEES			
FEE CALCULATION		Large Entity Small Entity			
1. BASIC FILING FEE		Fee Code Fee (\$) Fee Code Fee (\$) Fee Description Fee Paid			
Large Entity Small Entity					
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	770	2001	385	Utility filing fee	
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1) (\$)		0.00			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE					
Total Claims <input type="text"/> ** = <input type="text"/> x <input type="text"/> = <input type="text"/>					
Independent Claims <input type="text"/> ** = <input type="text"/> x <input type="text"/> = <input type="text"/>					
Multiple Dependent <input type="text"/> = <input type="text"/>					
Large Entity Small Entity					
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	
1202	18	2202	9	Claims in excess of 20	
1201	86	2201	43	Independent claims in excess of 3	
1203	290	2203	145	Multiple dependent claim, if not paid	
1204	86	2204	43	** Reissue independent claims over original patent	
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2) (\$)		0.00			
**or number previously paid, if greater; For Reissues, see above					
SUBMITTED BY		(Complete if applicable)			
Name (Print/Type) S. Peter Ludwig		Registration No. (Attorney/Agent)	25,351	Telephone	(212) 527-7770
Signature		Date	August 19, 2004		

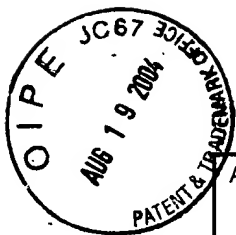
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Application No. (if known): 09/605,334

Attorney Docket No.: 06727/000H560-USO

Certificate of Express Mailing Under 37 CFR 1.10

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on August 19, 2004
Date

A. Stantini

Signature

A. Stantini

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Supplemental IDS (Citation) by Applicant – PTO/SB-08 (1 page)
Supplemental Information Disclosure Statement (2 pages)
Fee Transmittal Form (1 page)
Transmittal Form (1 page)
Check No. **5839** for \$180.00
Amendment in Response to Office Action of 5/20/04 (5 pages)
Amendment Transmittal (1 page)
Declaration of Inventors (2 pages)